

APPLICATION FOR ZONING CERTIFICATE - Residential

Richfield Township, Ohio

Date _____

Cert. No. _____

Address of Property _____

Owner of Property _____ Phone # _____

Address of Property Owner _____

Zoning Permit Applicant's Name _____ Phone # _____

Zoning Permit Applicant's Address _____

Zoning District _____ Lot # _____ Tax Map # _____

Allotment Name _____

Lot Size: Road Frontage _____ Depth _____ Area _____

Is Proposed Structure: Single Family 2-Unit Multi-Family Garage Accessory Building
 Addition Fence New Construction (provide sewage disposal verification)

Describe Construction (i.e.: 16'x16' addition to living space) _____

Setbacks: Front Right Sideline Left Sideline Rear Height

Distance to nearest structure _____ (Check Allotment Restrictions – when greater, they take precedence)

PROVIDE PLAT PLAN SHOWING ALL DIMENSIONS AND DISTANCES

Basement sq. ft. area _____
Area finished _____
1st Floor _____
2nd Floor _____
Garage _____ Parking for _____ vehicles
Porch/Deck _____
Total Sq. Ft. area _____
Driveway _____
TOTAL DUE: _____

Right of Revocation: It is understood and agreed by the applicant that any error, misstatement or misrepresentation of material fact, with or without intent, such as might or would cause refusal of this application, or any material alteration in the accompanying plans made subsequent to the issuance of a Zoning Certificate without the approval of the Richfield Township Zoning Inspector or the Richfield Township Board of Zoning Appeals, shall constitute sufficient grounds for revocation of such Zoning Certificate.

Signature of Applicant: _____ (certifying all above information is correct)

Zoning Inspector Approved Disapproves this application for the following reasons: _____

Zoning Inspector Signature

Date Issued